WATER WELL REPORT

IC Site ID: 8YP

Unique Well ID

State of Washington

Start Card: Water Right:

(1) OWNER: Name: F	rank Garrison		Address:				
(2) LOCATION OF WI (2a) Well Address	ELL: Island: Camano	Section: 30N/03E-24D Parcel Number: R33024-506-0160 8191F Source: 1 PWS-Name: North Porter Estates Water Co.					
(3) PROPOSED USE: M	Iunicipal Supply		(10) WELL LOG 1	DESCRIPTION:			
(4) TYPE OF WORK:	Owner's Well Number (if more th	nan one): 1	Material		From BGS	From MSL	Thick
New Well	Method: Cable Tool	ŕ	Clayey sand		0	384	32
(5) DIMENCIONE.		Blue clay		32	352	18	
(5) DIMENSIONS: Drilled: 432 feet.	Diameter of Well: 6	inches. ft.	Gravel Clayey sand		50 224	334 160	174 6
	Depth of Completed Well: 432		Gravel		230	154	87
(6) CONSTRUCTION DETAILS:			Hardpan		317	67	5
Casing Installed:	Diam. (in) from	to (ft)	Sand		322	62	5
	6 0	420	Blue clay		327	57	73
			Med. sand		400	-16	7
Screens: Type			Clay		407	-23	8
Screens: Type Stainless Steel		om to (ft) 122 427	Clayey sand Gravel		415 424	-31 -40	9 8
Stainless Steel		127 432	TD		432	-48	0
Surface seal:			RECEIVED				
Material: Bentonite To depth: 20 ft.		APR 1 6 2007					
(7) PUMP:				APR 162	וטטו		
Type: Submersible Horsepower: 5		DEPT. OF ECOLOGY					
(8) WATER LEVELS: 1 Land-surface elevation (MSL): 383.1 ft.			†	DEPT. OF LO		•	
` ,	AvgWL Elevation: 5 Calc'd Elev	,					
Earliest Level: 379.00	ft. below toc Date: 11/3/1980						
Lastest Level: 379.00	ft. below toc Date: 11/3/1980						
Average Level: 379.00	ft. below toc Average Date: 11/3/	1980	Work Completed	l: 11/3/1980 TD F	Elev: -48	ft. MSL	
(9) WELL TESTS:		· ···					
Type Yield	Drawdown After	Date		UCTOR CERTIFIC	ATION:		
-	••		Name: A. G. Kounkel				
Pump 15 gpm 4 feet 4 hours 11/3/		1/3/1980		s: Stanwood, WA 98292			
			Contractor's Registration Number	s _{r:} KOUNKWD099KT			
			Remarks: Parcel picked	from water system inform	mation.		

Max CL: Max NO3: 0.25

Generated by the Island County Hydrogeologic Database: 4/3/2007

Disclaimer: Data presented has been collected from a variety of sources. Island County makes no guarantee as to the validity or accuracy of this data. Please report any errors to the Island County Hydrogeologist



Well Tagging Form

Unique Well Tag No: APH038 RECORD VERIFICATION (check / one) Well Report available (please attach this form to the well report and submit it to the Ecology Regional Office near you) Verification inconclusive APR 1 6 2007 DEPT. OF ECOLOGY Well Report not available WELL OWNERSHIP IF DIFFERENT FROM WELL REPORT Name: North Porter Estates Water Co. Street Address: 627 S EAST CAMANO DR City: CAMANO ISLAN State: WA WELL LOCATION IF DIFFERENT FROM WELL REPORT Well Address: 3620 E Camano Dr/R33024-506-0160 City: Camano Island County: Island T. 30N R. 03E W.M. Sec. 24 NW 1/4 of the NW 1/4 FOR AGENCY USE ONLY **GPS** Latitude: 48 4.728526 Topographic Map Longitude: 122 22.57389 Survey Computer generated Elevation at land surface 383 (feet) meters (circle one) **Digital Altimeter** Topographic Map Additional Information, if available: Other: Computer Generated from **DEM and GPS XY Coordinates** Location marked on topographic map (please attach) Tag placed and well PUBLIC HEALTH GPS'd by: Location marked on air photo (please attach)

FOR AGENCY USE ONLY WELL CHARACTERISTICS: Physical Description of well (size of casing, type of well, housing, etc.) Brown Pumphouse In Front Yard Location of Well Identification Tag: Was supplemental tag needed for easy of identifying well? No Yes If yes, where was tag placed? D C В Α F E G Н SECTION: 30N/03E-24 Μ L K N Ρ Q R COMMENTS: FOR ECOLOGY WATER RESOURCES PROGRAM ONLY

Circle One:

Water Right #

Application

Permit

Certificate

Date Issued:

Claim

Exempt